The Pump Handle The Pump Handle



"I had an interview with the Board of Guardians of St. James's parish, on the evening of Thursday, 7th September, and represented the above circumstances to them. In consequence of what I said, the handle of the pump was removed on the following day."

John Snow, 1855

September 2017 Topics

- Raw Milk and Brucellosis Laura Cronquist
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- Flu Kickoff Lexie Barber
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 Sarah Weninger



Raw Milk and Brucellosis

The North Dakota Department of Health (NDDoH) confirmed that two North Dakota residents may have been exposed to Brucella RB51 when they consumed raw milk purchased at a Texas dairy. Raw milk from K-Bar Dairy in Paradise, Texas, tested positive for Brucella RB51, a type of bacteria that can cause a serious illness known as brucellosis. Several cases of brucellosis have already been linked to the raw milk, and purchase records indicate that people in more than 800 households from multiple states may be at risk of infection.

Brucellosis is associated with a wide range of signs and symptoms, some may persist for long periods of time or may never go away. Initial signs and symptoms can include fever, sweating, loss of appetite, malaise, headache, fatigue, and pain in muscles and joints. Chronic or reoccurring signs and symptoms can include arthritis, recurrent fevers, swelling of the liver and/or spleen, neurologic symptoms, swelling of the heart, chronic fatigue, depression, and swelling of the testicle and scrotum area. Rarely, brucellosis can be fatal.

The CDC recommends that anyone who consumed raw milk from K-Bar Dairy between June 1 and August 7, 2017, should receive post-exposure prophylaxis to prevent infection. The CDC also recommends that those who were exposed should watch for symptoms of brucellosis for six

months after they last drank the milk. Medical attention should be sought immediately if symptoms develop, as treatment of brucellosis can be very difficult. A minimum of six weeks of combination antibiotic therapy is required, which may need to be extended for four to six months if complications occur. Relapses requiring additional antibiotic treatment are not uncommon. However, some patients do not respond to extended antibiotic therapy and struggle with persistent symptoms of chronic brucellosis indefinitely.

In addition to Brucella, unpasteurized dairy products can be contaminated with other harmful bacteria and germs that can cause serious illness, hospitalization, and death. From 1993 to 2012, 127 outbreaks linked to raw dairy products were reported to CDC. Most of the outbreaks were caused by Campylobacter, Shiga toxin-producing E. coli (STEC), or Salmonella. For more information on brucellosis or the risks associated with consuming raw dairy products, please contact the NDDoH at 701.328.2378.



HIV in North Dakota Update

In May, the NDDoH released a Health Alert in response to an increase in HIV diagnoses in North Dakota among men who have sex with men. Since then, the NDDoH has been working in conjunction with the CDC to analyze genome sequence data to gain understanding of HIV transmission in the state and identify potential clustering. With this information, high priority contacts are being referred back into care for testing and to discuss prevention methods such as HIV Pre-Exposure Prophylaxis (PrEP). PrEP is a medication that if taken as directed can reduce the risk of HIV infection by more than 90% and is recommended, along with other prevention methods, for individuals at high risk for HIV infection. Individuals at risk for HIV infection should be routinely screened; this includes individuals who:

- Have anonymous sex partners
- Are diagnosed with an STD
- Have an HIV-positive partner or were named as an HIV contact
- Currently inject drugs or shares needles
- Exchange sex for drugs or money

For more information about HIV screening and PrEP, please contact the NDDoH HIV program at 800.472.2180.

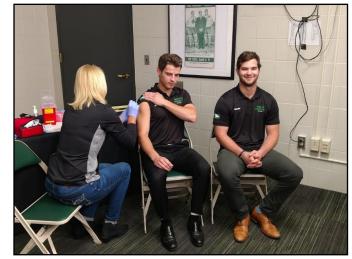


Influenza Kick-off

The NDDoH partnered with University of North Dakota (UND) Hockey to encourage North Dakotans to get vaccinated against the flu this year. Jill Baber and Lexie Barber from the NDDoH traveled to Grand Forks on September 25th for the 2017-2018 influenza vaccination kick off. During the event, UND hockey players Cam Johnson and Johnny Simonson were immunized by Julie Tennison from UND student health. Steve Westereng, chair of the Department of Sports Medicine at the UND School of Medicine and Health Sciences, spoke on the importance of the flu vaccine for student athletes, stating, "UND student-athletes spend a large amount of time together during the season. Unfortunately, this increases the chances of spreading something like influenza. A flu vaccine is offered to student-athletes to protect themselves and others around them. Everyone should consider a flu shot for the same reasons."

The flu vaccine is recommended for everyone 6 months and older, but it is especially important for certain groups of people who are at higher risk of serious complications from the flu. These include:

- Children 6 months through 4 years
- Adults 50 years and older
- Residents of long-term care facilities
- People of any age who have a chronic medical condition or who are immunocompromised
- Pregnant women
- American Indians or Alaskan Natives
- People who are morbidly obese



It is also important for health care workers and anyone else who has contact with high-risk individuals to be vaccinated. The most common symptoms of flu are fever, cough, sore throat, headache, chills, and body aches. Confirmed cases of influenza have already been reported to the NDDoH for the 2017-18 season, so now is a great time for people to get vaccinated. People should be vaccinated by the end of October, if possible.



2017 North Dakota & Minnesota HIV.STD.TB.Viral Hepatitis Symposium

The NDDoH and the Minnesota Department of Health (MDH) hosted the 2017 HIV, STD, TB and Viral Hepatitis Symposium, September 26-28 in Fargo, N.D. The NDDoH and MDH would like to thank everyone who presented and participated in the 2017 symposium. The symposium included excellent presentations from individuals representing national and local organizations, including the National Alliance of State and Territorial AIDS Directors (NASTAD), the Harm Reduction Coalition, NYC Health Department, Rural AIDS Action Network (RAAN), the National Coalition of STD Directors (NCSD), and many others.

The symposium highlighted hepatitis C elimination efforts occurring in the Cherokee Nation, described overdose prevention and harm reduction messaging, provided updated treatment recommendations for multi-drug resistant (MDR) TB, detailed comprehensive preventative healthcare for LGBT individuals, provided strategies for partner services, included the sharing of a survivor story of an individual with MDR TB, and many more informative topics. With the legalization of syringe service programs (SSPs) in North Dakota, there was also a workshop aimed to help participants discuss best practices in the development and implementation of an SSP. Available presentations for the symposium can be found at https://www.ndhealth.gov/HIV/Provider/.

The NDDoH and MDH would like to encourage participants to utilize presented information in their work as we envision and strive towards a world free of HIV, STDs, Viral Hepatitis and TB. If you are in need of additional information about a presentation, please <u>contact</u> the NDDOH HIV.STD.TB.Viral Hepatitis program at 701.328.2378.



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